

|   |  |                         |   |
|---|--|-------------------------|---|
| <b><i>Index of Claims</i></b>   |  | Application/Control No. | Applicant(s)/Patent Under Reexamination |
|  |  | 10550836                | YUMIKI ET AL.                           |
| Examiner  |  | Art Unit                |   |
| Strieb, Michael A   |  | 2809                    |   |

|   |          |   |            |   |              |   |          |
|---|----------|---|------------|---|--------------|---|----------|
| ✓ | Rejected | - | Cancelled  | N | Non-Elected  | A | Appeal   |
| = | Allowed  | ÷ | Restricted | I | Interference | O | Objected |

| <input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant |          |            |            |            |  |  |  | <input type="checkbox"/> CPA | <input type="checkbox"/> T.D. | <input type="checkbox"/> R.1.47 |  |
|---|----------|------------|------------|------------|--|--|--|------------------------------|-------------------------------|---------------------------------|--|
| CLAIM   |          | DATE       |            |            |  |  |  |                              |                               |                                 |  |
| Final   | Original | 09/14/2007 | 02/07/2008 | 09/11/2008 |  |  |  |                              |                               |                                 |  |
| 1   | 1        | ✓          | =          | =          |  |  |  |                              |                               |                                 |  |
|   | 2        | ✓          | ✓          | -          |  |  |  |                              |                               |                                 |  |
| 2   | 3        | ✓          | =          | =          |  |  |  |                              |                               |                                 |  |
| 3   | 5        | ✓          | =          | =          |  |  |  |                              |                               |                                 |  |
| 4   | 7        |            | =          | =          |  |  |  |                              |                               |                                 |  |